

NHS HEREFORDSHIRE CLINICAL COMMISSIONING GROUP

Briefing for Herefordshire Health Overview & Scrutiny Committee

Integrated Urgent Care Pathway Project

Subject:	Integrated Urgent Care Pathway Project
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PURPOSE OF THE REPORT

To inform the committee of NHS Herefordshire Clinical Commissioning Group plans to develop an integrated urgent care pathway.

RECOMMENDATION TO THE COMMITTEE

The Committee is asked to note the report and comment.

Briefing for Herefordshire HOSC
Integrated Urgent Care Pathway Project
NHS Herefordshire CCG

Introduction

Herefordshire Health Overview and Scrutiny Committee received a report in July 2013 regarding the work that Herefordshire CCG (HCCG) was undertaking regarding a review of urgent care services.

The report set out the challenges within the current urgent care system which are summarised below:

- The current urgent care system is inefficient and confusing for local people
- The current system is failing to meet performance targets
- Inequalities in access and outcomes are not being effectively addressed
- The current urgent care pathway is fragmented and is a barrier to demand control and establishing effective alternatives to A&E attendance.
- The development of an integrated urgent care pathway is a significant part of the solution to the challenges faced by WVT
- Existing contracts for elements of the service will expire in 2015/16

The pressures on the system, and operational challenges experienced by Wye Valley NHS Trust (WVT), particularly coinciding with the CQC inspection have provided further evidence of the need for change.

The report also set out details of the communications and engagement plan HCCG was to take forward over the coming months. The engagement process ran from September to November 2013 and the findings were published on HCCG website in December 2014. Two further events were held on the 25th of March and 5th June 2014. In total more than 540 patient experiences were captured that involved 372 hours of co-design work with the local community.

Current Progress

Following the review and the feedback from local people, HCCG has decided to change how it commissions urgent care services by introducing an outcomes approach to commissioning and contracting. Outcomes Based Commissioning (OBC) aims to shift the emphasis from the services a provider offers, to the outcomes they achieve for patients. This moves the focus from activities to results, and from how a service operates, to the benefits a service realises for patients. By using this approach important factors such as patient experience and the quality and safety of services will be built into future contracts.

Delivery of this programme supports achievement of Herefordshire Health and Wellbeing Strategy. HCCGs ambitions are that through this change programme we can:

- Reduce inconsistencies in the outcomes that patients receive
- Encourage investment in preventive care, to reduce unnecessary and inefficient use of treatment services
- Change the way that patients currently access the urgent care system
- Provide a service that is designed so that patients receive the care that is right for them, at the right place and at the right time
- Encourage behavioural change in provision by aligning incentives and outcomes so patients get the right treatment in the right place
- Encourage behavioural change in patients by ensuring they know how to self-care, access urgent care in the right place (e.g. pharmacy vs A/E) and navigate the system
- Reduce overall system costs and encourage service integration
- Deliver the national vision for urgent care in Herefordshire

As a result of the engagement programme the following outcomes have been agreed by HCCG to guide the urgent care OBC programme.

- I feel informed and clear about available and appropriate Urgent Care Services;
- I feel confident and knowledgeable about managing my condition and prepared to deal with and anticipate future urgent care issues;
- I feel reassured and happy as a result of my urgent care experience and 'known' and treated like a person by Urgent Care Services;
- I want to be helped, and when I am in need of care it is safe, effective and efficient;
- I want to live for as long as possible independently and in my home with the best quality of life wherever possible.

The current CCG commissioned functions within scope as part of this new approach are as follows:

- Accident and Emergency and Clinical Assessment Unit services, up to the point of hospital admission
- Primary care out of hours services
- Minor injury functions
- The Walk-in Centre functions
- Mental health activities supporting individual crises and Rapid Assessment, the Accident and Emergency Interface and Discharge service (psychiatric liaison).
- Minor ailments scheme
- NHS 111

HCCG believes that an integrated solution to the provision of urgent care services is the best way to improve the quality and efficiency of these services and address the fragmentation of the urgent care pathway. Through this mechanism HCCG will be able to optimally drive transformation and delivery through a whole pathway, outcomes based approach.

HCCG has identified Wye Valley NHS Trust (WVT) as being best placed to both put forward a solution to HCCG that delivers the entire urgent care pathway and to take forward the role as potential Accountable Lead Provider. Developing an acceptable integrated solution is likely to require the participation of other providers and HCCG believes that WVT is best placed to assume that co-ordinating role.

In reaching this decision the HCCG Governing Body considered the capacity of WVT to undertake this role given the CQC findings and the decision to place the Trust in Special Measures and WVT have provided assurances.

Wye Valley NHS Trust has been offered, and has accepted, this opportunity.

The Accountable Lead Provider (ALP) approach has the following attributes to support system redesign:

- Single contract for the commissioner
- Lead provider responsible for full range of services
- Management of the range of providers by the ALP
- Ability to develop incentives within the provider 'team'

The key components of the approach are described in the schematic below:

OBC - The key elements

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1. Defined population and scope
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2. Desired outcomes and associated indicators
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3. Financial value
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4. Duration of contract
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5. Commercial structure: incentives and and risk transfer



OBC contracts combine capitation and strong outcome incentives, with outcomes reflecting public and service user priorities. Providers are rewarded for system outcomes not just for an element of the pathway and have control where resource is spent along the pathway. Providers are held to account for improving outcomes and free to innovate and use their skill and experience to determine best way of delivering those outcomes.

Next Steps

Wye Valley NHS Trust will undertake a process of discussion regarding developing proposals. This dialogue will include discussion about an agreed approach to continued public and patient engagement in the process of developing a solution and, if required, subsequent consultation.

Following the submission of the proposed solution an evaluation process will be undertaken. This will determine if the solution is acceptable to HCCG and will deliver a fundamentally improved urgent care service for Herefordshire residents. HCCG will be seeking a nominee from social care to join the evaluation panel.

It is anticipated that if Wye Valley NHS Trust proposals are successful and are assessed as meeting the CCGs requirements the aim will be to begin implementing changes from Autumn 2015.

HCCG will continue to brief the HOSC and the Health and Wellbeing Board as the project moves forward.